

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Parrish for Congress

A. Full Name (Last, First, Middle Initial) Mark Lester			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 24 / 2013</div> </div>	
Mailing Address 1310 Cottonwood Valley Cir N			Transaction ID : VNHXTC3WNP6	
City Irving	State TX	Zip Code 75038-6200	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>				
Name of Employer Texas Health Resources		Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>500.00</div> </div>		
B. Full Name (Last, First, Middle Initial) Andrew Lotwin			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 23 / 2013</div> </div>	
Mailing Address 1060 Hilary Lane			Transaction ID : VNHXTC3VT31	
City Beverly Hills	State CA	Zip Code 90210	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>				
Name of Employer CACI International Inc		Occupation Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>250.00</div> </div>		
C. Full Name (Last, First, Middle Initial) Kennth McDonald			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>12 / 23 / 2013</div> </div>	
Mailing Address 88 Partridge Pl Apt B			Transaction ID : VNHXTC3VT55	
City West Point	State NY	Zip Code 10996-1605	Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>				
Name of Employer United States Military Academy		Occupation Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <div> <div></div> <div>1000.00</div> </div>		
SUBTOTAL of Receipts This Page (optional)			<div> <div></div> <div>1750.00</div> </div>	
TOTAL This Period (last page this line number only)			<div> <div></div> <div></div> </div>	